04-16-01



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Sindo Kou

Jia-Jie He

Title:

GROWING OF HOMOGENEOUS CRYSTALS BY BOTTOM SOLID

FEEDING

Docket No.:

032026:0546

BOX PATENT APPLICATION

Commissioner for Patents Patent and Trademark Office Washington, D.C. 20231

> "Express Mail" Mailing Label No.: EL742080281US Date of Deposit: April 13, 2001

I hereby certify that these attached documents

- *Form PTO-1082
- *Patent Application
- *Check for \$508.00 (No. 562735)
- *Five (5) Sheets of Informal Drawings
- *Information Disclosure Statement
- *Form PTO-1449
- *Cited Documents

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 35 C.F.R. § 1.10 on the date indicated above and is addressed to BOX PATENT APPLICATION, Commissioner for Patents, Patent and Trademark Office, Washington, D.C. 20231.

Enclosed for filing please find the above-referenced patent application. Please indicate receipt of this patent application by returning the attached postcard with the official Patent and Trademark Office receipt stamped thereon.

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FORM PTO-1082

Case Docket No. 032026:0546

THE COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

| wasnington, D.C. | 20251 | | | | | | | |
|--|---|--|---------------|--|----------------|----------|---------------------------|--------------|
| Sir: Transmitted herewith Inventors: Sindo Ko For: GROWING | | • • | | OM SOLID F | FEEDING | | | |
| Enclosed are: ☑ Five (5) sheets o ☐ An assignment o | f the invention to_ | | | | | | | |
| ☐ A certified copy of a ☐ An associate power of attorney. ☑ Information Disclosure Statement, Form PTO-1449, cited documents | | | | | | | | application. |
| The filing fee has be | en calculated as sl | nown below: | | | | | | |
| | (Col. 1) | (Col. 2) | | SMALL ENTITY | | - | OTHER THAN A SMALL ENTITY | |
| FOR: | NO. FILED | NO. EXTRA | | RATE | FEE | OR | RATE | FEE |
| BASIC FEE | | | | | \$355.00 | OR | | \$710 |
| TOTAL CLAIMS | 37-20 = | * 17 | | x 9 = | \$153.00 | OR | x 18 = | S |
| NDEP CLAIMS | 3-3 = | * 0 | | $x \ 40 =$ | \$ | OR | x 78 = | \$ |
| ☐ MULTIPLE DEPENDENT CLAIM PRESENTED | | | | + 135 = | S | OR | + 270 = | S |
| 34f the difference in Col. 1 is less than zero, enter "0" in Col. 2. | | | | TOTAL | \$508.00 | OR | TOTAL | \$ |
| Please charge my Deposit Account No the amount of \$ A duplicate copy of this sheet is enclosed. A check in the amount of \$508.00 to cover the filing fee is enclosed. The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No | | | | | | | | |
| ☐ The Commission credit any overpa ☐ Any pate ☐ The issu ☐ Any filin | yment to Deposit ent application pro e fee set in 37 CF ng fees under 37 C | rized to charge p Account No ocessing fees under R §1.18 at or bet | er 37 CFR \$1 | e following fe A duplicate c .17. of Notice of A extra claims. | opy of this sh | eet is e | enclosed. | |
| Please stamp the enclosed postcard with the filing date and serial number and return the same to me. | | | | Respectfully submitted, | | | | |

Marry C. Epostrom, Reg. No. 26,876 Foley & Lardner

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